Miami-Dade County Commissioner Sally A. Heyman, District 4

Announces

Mom and Pop Small Business Grant Program

(Application for financial assistance through Miami-Dade County)

Applications accepted:

January 14, 2013 through February 08, 2013

Return original completed applications no later than 12 noon February 8th to:

Commissioner Sally A. Heyman, District 4 1100 NE 163rd Street, #303 North Miami Beach, FL 33162

Phone: 305-787-5999

Faxed and incomplete applications will not be accepted

MOM AND POP SMALL BUSINESS GRANT PROGRAM

BRIEF DESCRIPTION

The Mom and Pop Small Business Grant Program was created to provide financial and technical assistance to qualified small businesses that are approved for funding. This program has allowed small owned and operated businesses the opportunity to interact with local government under favorable conditions ultimately bridging the gap between the two entities.

- The program provides financial assistance to further the economic viability of recipients. Funding can be used to purchase equipment, supplies, inventory, commercial liability insurance, security systems, advertising and marketing and to make minor renovations.
- Technical assistance is made available to small businesses in order to create a better working and business environment, promote economic development opportunities, educate owners about various county-funded programs and projects, form/foster better working relationships among small business owners, retain and eventually create more jobs, offer the necessary training that small business owners so desperately need to become more efficient and competitive.

The program has grown each year and is now being offered countywide. As a result, we recognize that the needs of each district are different and our goal is to address this diversity. This grant package is *only* for District 4. Deadlines and application forms for each district may differ. Therefore, please be sure to pick up the appropriate application.

Miami-Dade County Commissioner Sally A. Heyman Mom & Pop Small Business Grant Program Guidelines

Miami-Dade County Commissioner Sally A. Heyman is offering Mom & Pop Small Business Grant applications to qualified businesses located in District 4. All businesses *must* meet the following criteria in order to qualify:

- 1. In business for at least 2 year(s) (include proof such as articles of incorporation).
- 2. Cannot have more than seven (7) full-time employees.
- 3. Cannot be a part of a national chain.
- 4. Have no more than two (2) businesses.
- 5. Submit a current <u>Miami-Dade County Business Tax License</u> and Municipality license if located in a Municipality at the time of application. Business name on application must match one on license (include copy of **each** license for the past **two** years).
- 6. A physical address is required. No P.O. Box as mailing address allowed.
- 7. Applicant must apply in district where business is located.
- 8. Home-based businesses can apply.
- 9. Applications will not be accepted after deadline.
 - Deadline: 12 noon, Friday, February 8, 2013 NO EXCEPTIONS.
- 10. Only one application per business.
- 11. Non-profit agencies cannot apply.
- 12. Businesses that relocate out of the district during the application, award and payment processing of the grant will be disqualified.
- 13. Business or owner does not have a delinquent loan with Miami-Dade County or a County funded department or agency.
- 14. Businesses that received funding in the past can apply, however **<u>priority</u>** will be given to those businesses that have never received funding.
- 15. Application must be <u>typed</u> or <u>printed</u> only. If application is illegible, it will automatically be disqualified.
- 16. Applicants must sign and submit all requested documents. Incomplete applications will not be considered.
- 17. Must provide picture of business location (building, office, or work vehicle).

Mandatory Workshops for Approved Recipients

Guidelines for the Mom and Pop Small Business Grant Program require that each <u>approved recipient</u> attend a mandatory business training workshop.

It is very important that you attend the entire two-hour workshop and complete the required package at that time. Otherwise, you may be disqualified from the program.

Approved businesses selected by the grant committee for a Mom and Pop Small Business grant will receive the date, time and location of the workshop.

The date, time and location of the workshop will be finalized at a later date. Approved grant recipients will be contacted with the workshop information.

DISTRICT 4

Mom and Pop Small Business Grant Program Miami-Dade County

APPLICATION

(Please print or type – illegible applications will not be considered)

I. Business Information		
Business Name (as it appears on Licen	se)	
Owner(s) Name	24 AB	100
Business Address (as it appears on Lic	eense)	15-16
Owner's Home Address	City	Zip Code
Business Phone	Business Fax	Cell Phone
Email address		55 L
Total Control of the	\$	
Type of Business You Operate	Amount of funding	g requested
II. Program Usage		
I would like to be considered f	or financial assistance to	address the following
need(s): <u>USAGE</u>	DESCRIPTION	<u>ESTIMATES</u>
☐ Inventory / Supplies _	1	\$
☐ Business Equipment	M. Little	\$
☐ Marketing / Advertising _		\$
☐ Commercial Liability Insurance _	X-37 (b)	\$
☐ Minor Renovations		\$
☐ Security System		\$

^{***}applicants MUST fill in the blanks – if area incomplete, applications will not be considered**

Yes _____ No ____

Business owners are required to provide the following information:

1.	How long have you been in business? Number of year	ars	
2.	Have you ever applied for the Mom and Pop Grant be	fore: Yes _	No
3.	Have you received a Mom and Pop Grant in the past?	Yes	No
4.	If yes, how much funding did you receive? \$		
5.	My Miami-Dade County Business Tax License (2011, attached to the application.	2012 and 20	13) are
	and the tile applications	Yes	No
6.	My Municipality Business Tax License (2011, 2012 an the application.	d 2013) are	attached to
		Yes	No
7.	Are you or any of the shareholders employed by Miar	mi-Dade Coເ	ınty?
		Yes	No
8.	If yes, what department?		had l
9.	Have you ever applied for a loan?	Yes	No
10	.If yes, with whom?		
11	.Was the loan approved?	Yes	No
12	Do you have a past due loan with the County or any Coupartment or agency?	County fund Yes	
13	.If yes, with whom?		8 7/
14	.Will you be contributing any funding to the project?	Yes	No
15	.If yes, how much?	\$	7/
16	.Do you own the building that you occupy?	Yes	No
17	. Are you willing to participate in Business Developme	nt workshop	os?
		Yes	No
18	. Do you currently market your business?	Yes	No
	. If yes, how do you market, please explain (ex: newsp upons)	aper ads, in	ternet,

20. Do you belong to any networking groups?

22. Number of employ	ees? Full-time: P	art-time:	
23. Please provide the	following information regarding	your current e	employee(s):
NAME	HOME ADDRESS	ZIP CODE	White / Black Hispanic / Othe Male / Female (Please Circle)
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	Not The		WBHO M/
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	plain how you intend to use the fu	nding? Pleas	se print
	P0001 J0P00000	nding? Pleas	se print
	P0001 J0P00000	nding? Pleas	se print
	P0001 J0P00000	nding? Pleas	se print
If approved, please exp	P0001 J0P00000	nding? Pleas	se print
	P0001 J0P00000	nding? Pleas	se print
**This is the perfect oppor	indicates that I have read th		

^{**}Application will be considered incomplete unless a copy of County and City Occupational license are attached for all years required.**